OCT 24 2012

Amendment	
☐ Yes	☐ No

Disclosure Report Cover

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.

Do not use this form to update information.

1. Committee Information		(2)				
a. Full Name				***************************************		c. ID Number
Pruett Wal	den					OJ6B1B
b. Mailing Address (include City, Stat	e and Zip Code)	2002				d. Date Filed
172 Eastore	r Dr.					10/24/12
F C'1		CVALLA	>			e. Phone Number
torest City	NCZ	804:	5			828-245-5/20
2. Report Year 3. Period Start	Date (mm/dd/yy)	4. Period I	End Dat	e (mm/dd/yy)	5. Treasure	er Full Name
2012 7-1-1	2	10/	24/	12	Prut	/ /
6. Type of Committee (Check C					type of repo	rt from one category)
Candidate Campaign Part		nicipal		State/County		Referendum
	erendum	Organizationa	257	Organizati	ional	Organizational
	t Fundraiser	Thirty-five da	у	Quarterly		Pre-referendum
Legal Expense Fund	닏	Pre-primary		First		Final
	S. MO. HARMON CO. S.E.	Pre-election		Secon	7.50	Supplemental Final
7. Type of Fund (if applicable,	check one)	Pre-runoff		Third	**************************************	Annual
Booster Fund		Semi-annual		Fourt	35 ₍₁₎	☐ Special
☐ Building Fund	IH	Mid Yea	핥	Semi-annu	3523	76 7 1 1 2 2
Other:	lH.	Year End	1	Mid '		10. Special Report Name
8. Number of Fundraisers this	Report	Final Special		Year	End	
o. Number of Fundraisers this	Keport	Special		Final		
				☐ Special		
11. Account Information				ount Inform		MACHEN TO THE RESERVE OF THE PARTY OF THE PA
a. Financial Institution Full Name			a. Financ	cial Institution	Full Name	
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b. Purpose	c. Account Code		b. Purpo	se		c. Account Code
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(1)	d. Period Begin Ba	lance				d. Period Begin Balance
Chmpaign	\$ 1209	102				\$
CERTIFICATION	1700	. Un				Ψ
			2002	2.0	PG 101 102	
I certify that the Committee or Fun						
of the NC General Statutes and that report is complete, true and correct		그러그스로 얼맞 프리일을 마스마시크를 잃었다.				nds. I further certify that this
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Truet was	ien	0 Mg	001	Wald	el	10/24/12
Printed Name of Signo	er	Sig	nature of A	Appointed Treas	urer	Date
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Date Received:	7/24/12	Employ	yee: _	DL	- 🗆	Normal Mail
Date Postmarked:		Employ	/ee: _			Registered Mail Hand Delivered
Date Scanned:		Employ	/ee: _		_ 🗆	Electronically Filed
Date Data Entered:	_	Employ	/ee: _			Signer has not received mandatory training
Please Note: This form car	nnot be used to a	mend comm	ittee info	ormation sucl	h as the com	mittee address, treasurer,
	treasurer, custod					
You must amend t						

Detailed Summary Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

☐ Yes ☐ No

1. Committee Full Name (and Fund if applicable)	2. Type of Report		3. ID Number		
Privett Walder	IT	nird	056818		
Start of Election Cycle: January 1, 2012	١.	Total this Reporting Period	Total this d Election Cycle		
4) Cash on Hand at Start		\$ 1209.62	\$		
<u>RECEIPTS</u>					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	\$		
6) Contributions from Individuals	(CRO-1210)	\$ 1150.00) \$ 1428.00		
7) Contributions from Political Party Committees	(CRO-1220)	\$	\$ 1000,00		
8) Contributions from Other Political Committees	(CRO-1230)	\$	\$		
9) Loan Proceeds	(CRO-1410)	\$	\$ 1140,00		
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$	\$		
11) Other Receipt Sources					
11a) Interest on Bank Accounts	(CRO-1250)	\$	\$		
11b) Contributions from Not-For-Profit Organizations	(CRO-1250)	\$	\$		
11c) Outside Sources of Income	(CRO-1250)	\$	\$		
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$	\$		
11e) Exempt Purchase Price Sales	(CRO-1265)	\$	\$		
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,11c,	11d and 11e)	\$ 1150.00	\$ 3568.00		
<u>EXPENDITURES</u>					
13) Disbursements					
13a) Operating Expenditures	(CRO-1310)	\$ 2326.25	5 \$ 3470.63		
13b) Contributions to Candidates/Political Committees	(CRO-1310)	\$	\$		
13c) Coordinated Party Expenditures	(CRO-1310)	\$	\$		
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$	\$		
15) Loan Repayments	(CRO-1420)	\$	\$		
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$	\$		
17) In-Kind Contributions	(CRO-1510)	\$	\$ 64.00		
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15	5, 16 and 17)	\$ 23242			
19) Cash on Hand at End (Add lines 4 and 12 together, then sub	tract line 18)	\$ 33,37	\$ 33.37		
ADDITIONAL INFORMATION		n.s.			
20) Non-Monetary Gifts Given to Other Committees	(CRO-1330)	\$			
	(CRO-1430)	\$			
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$	and the second second		
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$	A STATE OF THE STA		
24) Account Transfers Within the Committee	(CRO-1720)	\$			
	(CRO-1710)	\$	\$		
	(CRO-1440)	\$	\$		
201 Control (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997) (1997)	(CRO-2220)	\$	\$		
28) Contributions to be Refunded	(CRO-1215)	\$	\$		

		rom Individua	34.4 7 .7	Pg	of t	Amendment Yes No
		ndividual contributione (and Fund if app		ontributions und	er \$50 if form Cl	
£	Millee Full Nam		ucable)			2. ID Number
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	ame, Mailing Addre			b. Job Title/Profes		d. Comments
	e city, state, & zip)				1	d. Comments
P	wett N	Valden		c. Employer's Nan	ne/Specific Field	
173	2 Easter	valden ur Pr			•	e. Election Sum to Date
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f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	tion	j. Date (mm/dd/yyy	yy) k. Amount
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						\$
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(includ	e city, state, & zip)	<u> </u>		0		
Du	over Di	radley		c. Employer's Nan	ne/Specific Field	
274	JMO	radley				e. Election Sum to Date
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(Ims u	ne musi ve on une o	o, Demice Summary Fi	ige CRO-1100)		200	100

Contributions from Individuals Use this form to report individual contributions over \$50 or c	Pg 2 of 4	Amendment Yes No
1. Committee Full Name (and Fund if applicable)	onuributions under \$50 if form C	2. ID Number
Tuest Walder		2. ID Number
3. Contributor Information	Add Remove	
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments
(include city, state, & zip)	Patronel	
Jorah Cato 4001 nc Hwy 86H Helbhough nc 27278	c. Employer's Name/Specific Field	-
4001 MC HWY OF19		e. Election Sum to Date
Hellshough nc 27278		\$
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a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments
(include city, state, & zip)	Diling	
Lail Sheesland	c. Employer's Name/Specific Field	1
1373 nOD HWA 24	c. Employer's Name/Specific Field	
211		e. Election Sum to Date
Jail Studstand 1373 ald Huy 74 Ellonbow nc 28040		\$
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□ check	9/28/12	\$ 50,00
		\$
		\$
3. Contributor Information	Add Remove	
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments
(include city, state, & zip)	Dating	
Julia Henaley	c. Employer's Name/Specific Field	
BU n washington D	er zampioyer o rannes pecine riciu	
Julia Hensley 811 n. Washington D Pulherboudton nl 28139		e. Election Sum to Date
Fundadation 1 201)		
f. Prior g. Account Code h. Form of Payment i. In-Kind Descrip	j. Date (mm/dd/yy	
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		\$
		\$
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(This line must be on line 6 of Detailed Summary Page CRO-1100)		\$ 1150-
CRO-1210 NC State Boa	rd of Elections	April 2007

Contributions from Individuals Use this form to report individual contributions over \$50 or contributions.	Pg of L	Amendment Yes No No
1. Committee Full Name (and Fund if applicable)	onarounous under \$50 m form er	2. ID Number
Purett Walder		2. 15 Transer
3. Contributor Information	Add Remove	
a. Full Name, Mailing Address & Phone	b. Job Title/Profession	d. Comments
(include city, state, & zip)	2 7 0	
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(include city, state, & zip)	2-01/10 8	
Keith Webb-miGill Eng,	c. Employer's Name Specific Field	
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alexander nc 28701		e. Election Sum to Date
and 11900 110 1810 (\$
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Dennie Martin	c. Employer's Name/Specific Field	
38 marse It	c. Employer's Name/Specific Field	
Dennie Martin 38 orange St ashwille nc 28801		e. Election Sum to Date
asheville nc 28801		\$
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(This line must be on line 6 of Detailed Summary Page CRO-1100)		1100,-

Cont	ributions fi	rom Individua	ıls	Pg	Hoff		dment Yes
Use this	s form to report i	ndividual contributio	ons over \$50 or c	ontributions und	ler \$50 if form C	RO 1205 is	s not used
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3. Cont	tributor Inform	ation		Add 🔲 Re	move		The Paris
a. Full N	ame, Mailing Addr	ess & Phone		b. Job Title/Profe	ession	d. Commer	nts
(includ	le city, state, & zip)	^		0.0	2		
do	10k 2 27 E. 7	uly		c. Employer's Na	me/Specific Field		
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Disbursemen	nts
Dissuiscinci	110

Disbursements	Pg	1	of	4	Amendment _ Yes	
Use this form to report expenditures from the committee for operating						

	coordinated party ex-						
1. Committee F	full Name (and Func	d if applicable)		40.825.23			2. ID Number
Ruet	I dual	den					
3. Type of Disb	ursement (Please	e use separate CR	(0-131 0) forms for e	each type of Dist	burse	ment.)
Operating Expe		ntributions to Candida					ted Party Expenditures
4. Payee Inform	nation	NESSEE AND ADDRESS OF THE PARTY		Add	Remove		GREAT DESIGNATION OF THE SECOND
	failing Address & Pho	one			ed Committee Name	e	d. Comments
(include city, state,							W COMMISSION
	San College Co			1			
WC A1				Federal	stered (Specify) County:	******	
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	line 13b of Detailed Sum)	3727/225
100	line 13c of Detailed Sum	50 0000	-				duller
	odes (List detailed						
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A* - Media	B* - Printin						her Candidate
E - Salaries	F* - Equipr			litical Party			g Public Office Expenses
I - Postage	J - Penaltie	28	K* - U	ffice Expens	ses Q* - Do	mati	on to Legal Expense Fund
O* Other	e detailed evalanation	on in required :	eemoulee	Gold (le)			

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LIO	ours		1110

			1			
	1	7	4	Amendment		
Pg	1	of	t	☐ Yes	☐ No	

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	coordinated party exp						
1. Committee F	Full Name (and Fund	l if applicable)				2. ID Number	
3. Type of Disb	Purcement (Please	use separate CR	D-131(forme for (and tune of Dist	Lauranant)	
Operating Exp		tributions to Candida				pordinated Party Expenditures	
4. Payee Inform		moudons to Canara	les/1 o	Add	Remove	ordinated Party Expenditures	
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(include city, state,		JIIC		D. Coor ansass	ea Communec i	ie d. Comments	
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5. Total only th				278		\$ 524.50	
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(This line goes in	ı line 13b of Detailed Sum	nmary Page CRO-110	00 if Cont	trib to Candida	ates/Political Comm	" つ ユフノ フェ	
(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)							
7. Purpose Codes (List detailed expenditure code in (h.) above)							
A* - Media	B* - Printin			undraising	D - To	Another Candidate	
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Exp							
I - Postage	I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fun						
O* Other	O* Other						
* Codes requir	re detailed explanation	on in required r	emarks	field (k)			

T . I		
DISD	ursen	ients

Pg of Amendment No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

	coordinated party ext						
1. Committee F	Full Name (and Fund	I if applicable)				2. ID Number	
I we	Just Walder.						
3. Type of Disb	ursement (Please	use separate CR	O-1310) forms for e	each type of Dist	bursement.)	
Operating Expe		tributions to Candidat				ordinated Party Expenditures	
4. Payee Inform	nation			Add 🔲	Remove		
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(include sity state	Pr gip)		Dryc Leb		***		
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	ling Address & Phone			b. Coordinate	ed Committee Name	ne d. Comments	
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(include city, stat	te, & zip)					u comment	
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7. Purpose Codes (List detailed expenditure code in (h.) above)							
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A* - Media B* - Printing C* - Fundraising D - To Another Candidate							
E - Salaries F* - Equipment G - Political Party H* - Holding Public Office Expense I - Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Full							
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Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

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	- Postage J - Penalties K* - Office Expenses Q* - Donation to Legal Expense Fund						
O* Other							
	* Codes require detailed explanation in required remarks field (k)						